

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Southern District Of New York

(State)

Case number (if known): _____ Chapter 11

☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Accredited Limousine Service, LLC

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business* as names

3. Debtor's federal Employer Identification Number (EIN) 20 - 3 8 0 0 9 8 4

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

600 Mamaroneck Avenue, 4th Floor

Number Street

Number Street

P.O. Box

Harrison NY 10528

City State ZIP Code

City State ZIP Code

Location of principal assets, if different from principal place of business

WESTCHESTER

County

Number Street

City State ZIP Code

5. Debtor's website (URL) www.accreditedlimo.com; www.alscoach.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: _____

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

4 8 5 3

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9
☒ Chapter 11. **Check all that apply:**

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No

☐ Yes.

District _____ When _____ Case number _____
MM / DD / YYYY
District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☒ No

☐ Yes.

Debtor _____ Relationship _____
District _____ When _____
MM / DD / YYYY
Case number, if known _____

List all cases. If more than 1, attach a separate list.

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

11. Why is the case filed in this district?

Check all that apply:

☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property? _____

Number _____ Street _____

City _____ State _____ ZIP Code _____

Is the property insured?

☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☒ Funds will be available for distribution to unsecured creditors.

☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

☒ 1-49

☐ 50-99

☐ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5,001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated assets

☒ \$0-\$50,000

☐ \$50,001-\$100,000

☐ \$100,001-\$500,000

☐ \$500,001-\$1 million

☐ \$1,000,001-\$10 million

☐ \$10,000,001-\$50 million

☐ \$50,000,001-\$100 million

☐ \$100,000,001-\$500 million

☐ \$500,000,001-\$1 billion

☐ \$1,000,000,001-\$10 billion

☐ \$10,000,000,001-\$50 billion

☐ More than \$50 billion

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

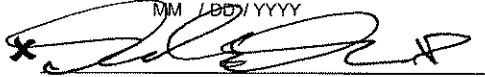
17. Declaration and signature of authorized representative of debtor

- ☒ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☒ I have been authorized to file this petition on behalf of the debtor.
- ☒ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

MM / DD / YYYY



Signature of authorized representative of debtor

Douglas Thornton

Printed name

Title Sole/Managing Member

18. Signature of attorney


Signature of attorney for debtor

Date

MM / DD / YYYY

Douglas J. Pick

Printed name

Pick & Zabicki LLP

Firm name

369 Lexington Ave., 12th Fl.

Number Street

New York

City

NY

State

10017

ZIP Code

(212) 695-6000

Contact phone

dpick@picklaw.net

Email address

Bar number

NY

State

UNITED STATES BANKRUPTCY COURT
Southern District of New York

In re:

Case No. BKY

Accredited Limousine Service, LLC,

Debtor(s)

Chapter 11 Case

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

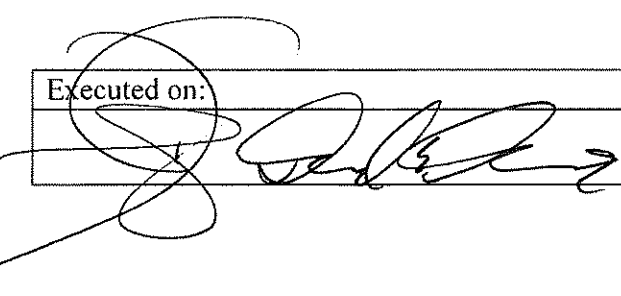
I, Douglas Thornton, declare under penalty of perjury that I am the Sole/Managing Member of Accredited Limousine Service, LLC, a New York corporation and that on January 23, 2019 the following resolution was duly adopted by the Sole/Managing Member of this corporation:

\Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that Douglas Thornton, Sole/Managing Member of this corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that Douglas Thornton, Sole/Managing Member of this corporation, is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case; and

Be It Further Resolved, that Douglas Thornton, Sole/Managing Member of this corporation, is authorized and directed to employ Douglas J. Pick, attorney and the law firm of Pick & Zabicki LLP to represent the corporation in such bankruptcy case.\

Executed on:	Signed:
	Douglas Thornton (<i>Name and Address of Subscriber</i>)

Fill in this information to identify the case:

Debtor name Accredited Limousine Service, LLC

United States Bankruptcy Court for the: Southern District of New York

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)

1a. Real property:

Copy line 88 from *Schedule A/B*

\$ 0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*

\$ 646,075.00

1c. Total of all property:

Copy line 92 from *Schedule A/B*

\$ 663,575.00

Part 2: Summary of Liabilities

2. *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, at the bottom of page 1 of *Schedule D*

\$ 1149649.6

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 6a of *Schedule E/F*

\$ 0

3b. Total amount of claims of non-priority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*

+ \$ 345219.26

4. Total liabilities

Lines 2 + 3a + 3b

\$ 1,494,868.86

Fill in this information to identify the case:

Debtor name Accredited Limousine Service, LLC
United States Bankruptcy Court for the: Southern District Of New York
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim		
					If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	First Home Bank 9190 Seminole Blvd. Seminole, FL 33772				\$309,576.31	\$0.00	\$309,576.31
2	U.S. Fire Insurance Company P.O. Box 28146 New York, NY 10087-8146		Insurance Premiums				\$109,255.00
3	Webster Bank, N.A. 436 Slater Road, NB 145 New Britain, CT 06053				\$99,600.00	\$0.00	\$99,600.00
4	NYS Tax Commission P.O. Box 5149 Albany, NY 11205		Tax Lien		\$89,750.73	\$0.00	\$89,750.73
5	American Express Bank, FSB 4315 South 2700 West Salt Lake City, UT 84184				\$84,580.00	\$0.00	\$84,580.00
6	American Express Platinum P.O. Box 650448 Dallas, TX 75265-0448		Credit Card				\$50,462.33
7	Sam Bryant 171 Lyons Avenue Scarsdale, NY 10583						\$35,000.00
8	Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492		Credit Card				\$29,352.00

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9	Commissioners of The State Insurance Fund 199 Church Street New York, NY 10007		Alleged Workers' Compensation Obligations	Contingent Unliquidated Disputed			\$25,953.47
10	Joseph Eaton, CPA 334 Underhill Avenue Suite 4B Yorton Heights, NY 10598		Accounting Services				\$25,771.56
11	Chase Business Preferred P.O. Box 1423 Charlotte, NC 28201-1423		Credit Card				\$19,500.00
12	Webster Bank - Elan Financial Services P.O. Box 790408 St. Louis, MO 63179-0408		Credit Card				\$14,000.00
13	Comdata 5301 Maryland Way Brentwood, TN 37027		Corporate Fuel Account				\$13,617.00
14	Guru Networks 222 Purchase Street Suite 253 Rye, NY 10580		General Services				\$12,307.90
15	Chase Business Preferred P.O. Box 1423 Charlotte, NC 28201-1423		Credit Card				\$10,000.00
16	Micky Roman c/o Chopra & Nocerino, LLP 85 Willis Avenue, Suite E Mineola, NY 11501		Personal Injury Claim	Contingent Unliquidated Disputed			Unknown
17							
18							
19							
20							

Fill in this information to identify the case:

Debtor name Accredited Limousine Service, LLC
United States Bankruptcy Court for the: Southern District of New York
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$0.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. <u>Webster Bank</u>	<u>Checking/Operating</u>	<u>0 8 2 3</u>	\$5,000.00
3.2. _____	_____	_____	\$ _____

4. Other cash equivalents (Identify all)

4.1. _____	\$ _____
4.2. _____	\$ _____

5. Total of Part 1

\$5,000.00

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. _____	\$ _____
7.2. _____	\$ _____

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. _____ \$ _____
8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ _____

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes. Fill in the information below.

Current value of debtor's
interest

11. Accounts receivable

11a. 90 days old or less:	<u>\$28,775.00</u>	-	<u>\$0.00</u>	=	→	<u>\$28,775.00</u>
	face amount		doubtful or uncollectible accounts			
11b. Over 90 days old:	<u>\$23,000.00</u>	-	<u>\$23,000.00</u>	=	→	<u>\$0.00</u>
	face amount		doubtful or uncollectible accounts			

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$28,775.00

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

Valuation method
used for current value

Current value of debtor's
interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. _____	_____	\$ _____
14.2. _____	_____	\$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____	_____ %	\$ _____
15.2. _____	_____ %	\$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____	_____	\$ _____
16.2. _____	_____	\$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known)

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials	MM / DD / YYYY	\$		\$
20. Work in progress	MM / DD / YYYY	\$		\$
21. Finished goods, including goods held for resale	MM / DD / YYYY	\$		\$
22. Other inventory or supplies	MM / DD / YYYY	\$		\$
23. Total of Part 5 Add lines 19 through 22. Copy the total to line 84.				\$

24. Is any of the property listed in Part 5 perishable?

- ☐ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
☐ Yes. Book value Valuation method Current value

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$		\$
29. Farm animals Examples: Livestock, poultry, farm-raised fish	\$		\$
30. Farm machinery and equipment (Other than titled motor vehicles)	\$		\$
31. Farm and fishing supplies, chemicals, and feed	\$		\$
32. Other farming and fishing-related property not already listed in Part 6	\$		\$

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. Is the debtor a member of an agricultural cooperative?

☐ No

☐ Yes. Is any of the debtor's property stored at the cooperative?

☐ No

☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

☐ No

☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. Is a depreciation schedule available for any of the property listed in Part 6?

☐ No

☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

☐ No

☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☒ No. Go to Part 8.

☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
_____	\$ _____	_____	\$ _____
40. Office fixtures			
_____	\$ _____	_____	\$ _____
41. Office equipment, including all computer equipment and communication systems equipment and software			
_____	\$ _____	_____	\$ _____
42. Collectibles <i>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles</i>			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$ _____

44. Is a depreciation schedule available for any of the property listed in Part 7?

☐ No

☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☐ No

☐ Yes

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
--	--	---	------------------------------------

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1 <u>26 Livery Cars - See Attached Schedule</u>	\$ _____	_____	\$ <u>612,300.00</u>
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$612,300.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 _____	_____	\$ _____	_____	\$ _____
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ _____

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets _____	\$ _____	_____	\$ _____
61. Internet domain names and websites <u>www.accreditedlimo.com</u>	\$ _____	_____	\$Unknown
62. Licenses, franchises, and royalties <u>Professional Limousine Service Operating License</u>	\$ _____	_____	\$Unknown
63. Customer lists, mailing lists, or other compilations _____	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property _____	\$ _____	_____	\$ _____
65. Goodwill _____	\$ _____	_____	\$ _____

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ Total face amount - doubtful or uncollectible amount = \Rightarrow \$ _____

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____ \$ _____

Nature of claim _____

Amount requested \$ _____

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

_____ \$ _____

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$5,000.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$28,775.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment, and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$612,300.00	
88. Real property. <i>Copy line 56, Part 9.</i> →		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$646,075.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.	\$646,075.00	

Attachment
Debtor: Accredited Limousine Service, LLC Case No:

Attachment 1: Additional Internet Domain Names and Websites

Description: www.alscoach.com

Book Value:

Valuation method :

Value: Unknown

Creditor	Loan#	Description	Loan Balance	Estimated Value
TCF Commercial Finance	003-0735636-500	(2) 2017 FORD VANS	\$141,895.00	141,900.00
TCF Commercial Finance	003-0735636-500	(1) 2016 MERCEDES SPRINTER	\$36,658.00	36,700.00
Edson Financial	01-0358740-700	(4) 2018 CHRYSLER 300 Sedans	\$116,866.20	116,900.00
Toyota Financial Services	022 6613696	Toyota Camry	\$2,868.79	8,000.00
	022 6613744	Toyota Camry	\$2,916.95	8,000.00
	022 6613751	Toyota Camry	\$2,863.57	8,000.00
	022 6614492	Toyota Camry	\$2,902.76	8,000.00
	022 6614502	Toyota Camry	\$2,909.06	3,000.00
	022 6614501	Toyota Camry	\$2,910.22	8,000.00
	022 6614500	Toyota Camry	\$2,930.01	8,000.00
	022 6614490	Toyota Camry	\$2,900.00	8,000.00
Sterling Bank	4020-39707	2016 Mercedes-Benz Metris	\$ 10,263.28	13,400.00
	4020-40410	2016 Chevrolet Suburban LT SUV	\$ 15,189.73	23,000.00
	4020-40415	2016 Chevrolet Suburban LT SUV	\$ 14,836.68	21,000.00
	4020-43152	(3) 2017 Lincoln Continental Sedan	\$ 51,570.96	48,000.00
	4020-46928	(2) 2016 Chrysler 300 Sedans	\$ 19,128.90	33,800.00
	4020-47381	2015 Ford F650 Mini Bus	\$ 21,965.27	108,600.00
N/A (Owned Outright)	N/A	(2) Toyota Camrys	N/A	10,000.00
Total Estimated Value				612,300.00

Fill in this information to identify the case:

Debtor name Accredited Limousine Service, LLC
United States Bankruptcy Court for the: Southern District of New York
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
Do not deduct the value of collateral

Column B
Value of collateral that supports this claim

<p>2.1 Creditor's name <u>American Express Bank, FSB</u></p> <p>Creditor's mailing address <u>4315 South 2700 West</u> <u>Salt Lake City, Utah 84184</u></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number <u>2 3 0 0</u></p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority. <u>1: American Express Bank, FSB;</u> <u>See Attachment 1</u></p>	<p>Describe debtor's property that is subject to a lien <u>All Assets</u></p> <p>Describe the lien <u>Nonpossessory</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$84,580.00</u></p>	<p><u>\$0.00</u></p>
<p>2.2 Creditor's name <u>Edson Financial</u></p> <p>Creditor's mailing address <u>MAC N9300-100, 600 South 4th Street</u> <u>Minneapolis, Minnesota 55415</u></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number <u>- 7 0 0</u></p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p>Describe debtor's property that is subject to a lien <u>4 - 2018 Chrysler 300 Sedans</u></p> <p>Describe the lien <u>Purchase</u></p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$116,866.20</u></p>	<p><u>\$116,900.00</u></p>
<p>3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.</p>		<p><u>\$1,149,649.60</u></p>	

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.3 Creditor's name</p> <p><u>First Home Bank</u></p> <p>Creditor's mailing address</p> <p><u>9190 Seminole Blvd.</u> <u>Seminole, Florida 33772</u></p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number <u>5 0 0 4</u></p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p>_____</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p><u>All Assets</u> <u>\$309,576.31</u> <u>\$0.00</u></p> <p>Describe the lien</p> <p><u>Nonpossessory</u></p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
<p>2.4 Creditor's name</p> <p><u>NYS Tax Commission</u></p> <p>Creditor's mailing address</p> <p><u>P.O. Box 5149</u> <u>Albany, New York 11205</u></p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number <u>1 3 6 2</u></p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p>_____</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p><u>All Assets</u> <u>\$89,750.73</u> <u>\$0.00</u></p> <p>Describe the lien</p> <p><u>Tax Lien</u></p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known)

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.5 Creditor's name Sterling Bank Creditor's mailing address One Marcus Avenue Lake Success, New York 11042 Creditor's email address, if known Date debt was incurred Last 4 digits of account number <u>9 7 0 7</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien 2016 Mercedes-Benz Metris \$13,398.00 \$13,400.00 Describe the lien Purchase Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
--	--

2.6 Creditor's name Sterling Bank Creditor's mailing address One Marcus Avenue Lake Success, New York 11042 Creditor's email address, if known Date debt was incurred Last 4 digits of account number <u>0 4 1 0</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien 2016 Chevrolet Suburban LT \$22,960.00 \$23,000.00 Describe the lien Purchase Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
--	---

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known)

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.7 Creditor's name Sterling Bank Creditor's mailing address One Marcus Avenue Lake Success, New York 11042 Creditor's email address, if known Date debt was incurred Last 4 digits of account number 0 4 1 5 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien 2016 Chevrolet Suburban LT \$20,910.00 \$21,000.00 Describe the lien Purchase Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	---

2.8 Creditor's name Sterling Bank Creditor's mailing address One Marcus Avenue Lake Success, New York 11042 Creditor's email address, if known Date debt was incurred Last 4 digits of account number 3 1 5 2 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien 3 - 2017 Lincoln Continental Sedans \$47,990.00 \$48,000.00 Describe the lien Purchase Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	--

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known)

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.1 Creditor's name <u>TCF Equipment Finance</u> Creditor's mailing address <u>11100 Wayzata Blvd., Suite 801</u> <u>Minnetonka, Minnesota 55305</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number <u>5 0 0</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____.	Describe debtor's property that is subject to a lien <u>2 - 2017 Ford Vans</u> <div style="text-align: right;">\$141,895.00 \$141,900.00</div> Describe the lien <u>Purchase</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
--	---

2.12 Creditor's name <u>TCF Equipment Financing</u> Creditor's mailing address <u>11100 Wayzata Blvd., Suite 801</u> <u>Minnetonka, Minnesota 55305</u> Creditor's email address, if known _____ Date debt was incurred _____ Last 4 digits of account number <u>5 0 0</u> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. _____ _____ _____ <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____.	Describe debtor's property that is subject to a lien <u>2016 Mercedes-Benz Sprinter</u> <div style="text-align: right;">\$36,658.00 \$36,700.00</div> Describe the lien <u>Purchase</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
---	--

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 1: Additional Page

Column A
Amount of claim
Do not deduct the value
of collateral.

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.13 Creditor's name</p> <p><u>Toyota Financial Services</u></p> <p>Creditor's mailing address</p> <p><u>P.O. Box 15012</u> <u>Chandler, Arizona 85244-2012</u></p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number <u>3 6 9 6</u></p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <u>See Attachment 2</u></p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p><u>Toyota Camry</u> <u>\$2,868.79</u> <u>\$8,000.00</u></p> <p>Describe the lien</p> <p><u>Purchase</u></p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>
---	--

<p>2.14 Creditor's name</p> <p><u>Toyota Financial Services</u></p> <p>Creditor's mailing address</p> <p><u>P.O. Box 15012</u> <u>Chandler, Arizona 85244-5012</u></p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number <u>3 7 4 4</u></p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.13</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p><u>Toyota Camry</u> <u>\$2,916.95</u> <u>\$8,000.00</u></p> <p>Describe the lien</p> <p><u>Purchase</u></p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>
---	--

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known)

Part 1: Additional Page

Column A
Amount of claim
Do not deduct the value
of collateral

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.15 Creditor's name</p> <p>Toyota Financial Services</p> <p>Creditor's mailing address</p> <p>P.O. Box 15012</p> <p>Chandler, Arizona 85244-5012</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number 3 7 5 1</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.13</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p>Toyota Camry</p> <p>\$2,863.57</p> <p>\$8,000.00</p> <p>Describe the lien</p> <p>Purchase</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
---	--

<p>2.16 Creditor's name</p> <p>Toyota Financial Services</p> <p>Creditor's mailing address</p> <p>P.O. Box 15012</p> <p>Chandler, Arizona 85244-5012</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number 4 4 9 2</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.13</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p>Toyota Camry</p> <p>\$2,902.76</p> <p>\$8,000.00</p> <p>Describe the lien</p> <p>Purchase</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
---	--

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known)

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.17 Creditor's name</p> <p>Toyota Financial Services</p> <p>Creditor's mailing address</p> <p>P.O. Box 15012</p> <p>Chandler, Arizona 85244-5012</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number 4 5 0 2</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.13</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p>Toyota Camry</p> <p>\$2,909.06</p> <p>\$3,000.00</p> <p>Describe the lien</p> <p>Purchase</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
---	--

<p>2.18 Creditor's name</p> <p>Toyota Financial Services</p> <p>Creditor's mailing address</p> <p>P.O. Box 15012</p> <p>Chandler, Arizona 85244-5012</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number 4 5 0 1</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.13</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p>Toyota Camry</p> <p>\$2,910.22</p> <p>\$8,000.00</p> <p>Describe the lien</p> <p>Purchase</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
---	--

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known)

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.19 Creditor's name</p> <p>Toyota Financial Services</p> <p>Creditor's mailing address</p> <p>P.O. Box 15012</p> <p>Chandler, Arizona 85244-5012</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number 4 5 0 0</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.13</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p>Toyota Camry</p> <p>\$2,930.01</p> <p>\$8,000.00</p> <p>Describe the lien</p> <p>Purchase</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
---	--

<p>2.20 Creditor's name</p> <p>Toyota Financial Services</p> <p>Creditor's mailing address</p> <p>P.O. Box 15012</p> <p>Chandler, Arizona 85244-5012</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number 4 4 9 0</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.13</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p>Toyota Camry</p> <p>\$2,900.00</p> <p>\$8,000.00</p> <p>Describe the lien</p> <p>Purchase</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
---	--

Debtor

Accredited Limousine Service, LLC
Name

Case number (if known)

Part 1: Additional Page

Column A
Amount of claim

Do not deduct the value
of collateral

Column B

Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.21 Creditor's name</p> <p>Webster Bank, N.A.</p> <p>Creditor's mailing address</p> <p>436 Slater Road, NB 145</p> <p>New Britain, Connecticut 06053</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number 1 5 6 8</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1</u></p>	<p>Describe debtor's property that is subject to a lien</p> <p>All Assets</p> <p>\$99,600.00</p> <p>\$0.00</p> <p>Describe the lien</p> <p>Nonpossessory</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
--	--

<p>2.22 Creditor's name</p> <p>Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>\$0.00</p> <p>\$28,775.00</p> <p>Describe the lien</p> <p>Is the creditor an insider or related party?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
---	---

Attachment
Debtor: Accredited Limousine Service, LLC Case No:

Attachment 1

2:First Home Bank; 3:NYS Tax Commission; 4:Webster Bank, N.A.

Attachment 2

1:Toyota Financial Services; 2:Toyota Financial Services; 3:Toyota Financial Services; 4:Toyota Financial Services; 5:Toyota Financial Services;
6:Toyota Financial Services; 7:Toyota Financial Services; 8:Toyota Financial Services

Fill in this information to identify the case:

Debtor Accredited Limousine Service, LLC
United States Bankruptcy Court for the: Southern District of New York
Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
☐ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
_____	Check all that apply.	\$ _____	\$ _____
_____	<input type="checkbox"/> Contingent		
_____	<input type="checkbox"/> Unliquidated		
_____	<input type="checkbox"/> Disputed		
Date or dates debt was incurred _____	Basis for the claim: _____		
Last 4 digits of account number _____	Is the claim subject to offset?		
	<input type="checkbox"/> No		
	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)			

2.2 Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
_____	Check all that apply.	\$ _____	\$ _____
_____	<input type="checkbox"/> Contingent		
_____	<input type="checkbox"/> Unliquidated		
_____	<input type="checkbox"/> Disputed		
Date or dates debt was incurred _____	Basis for the claim: _____		
Last 4 digits of account number _____	Is the claim subject to offset?		
	<input type="checkbox"/> No		
	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)			

2.3 Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
_____	Check all that apply.	\$ _____	\$ _____
_____	<input type="checkbox"/> Contingent		
_____	<input type="checkbox"/> Unliquidated		
_____	<input type="checkbox"/> Disputed		
Date or dates debt was incurred _____	Basis for the claim: _____		
Last 4 digits of account number _____	Is the claim subject to offset?		
	<input type="checkbox"/> No		
	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)			

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 4 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address <u>American Express Platinum</u> <u>P.O. Box 650448</u> <u>Dallas, Texas 75265-0448</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>4 0 0 3</u>	As of the petition filing date, the claim is: <u>\$50,462.33</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address <u>Capital One Bank</u> <u>P.O. Box 6492</u> <u>Carol Stream, Illinois 60197-6492</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>8 0 7 8</u>	As of the petition filing date, the claim is: <u>\$29,352.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address <u>Chase Business Preferred</u> <u>P.O. Box 1423</u> <u>Charlotte, North Carolina 28201-1423</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>2 7 3 5</u>	As of the petition filing date, the claim is: <u>\$19,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address <u>Chase Business Preferred</u> <u>P.O. Box 1423</u> <u>Charlotte, North Carolina 28201-1423</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>9 7 1 5</u>	As of the petition filing date, the claim is: <u>\$10,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address <u>Comdata</u> <u>5301 Maryland Way</u> <u>Brentwood, Tennessee 37027</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$13,617.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Corporate Fuel Account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address <u>Commissioners of The State Insurance Fund</u> <u>199 Church Street</u> <u>New York, New York 10007</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$25,953.47</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>See Attachment 1</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor

Accredited Limousine Service, LLC

Name

Case number (if known)

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	Nonpriority creditor's name and mailing address <u>Guru Networks</u> <u>222 Purchase Street Suite 253</u> <u>Rye, New York 10580</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$12,307.90
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>General Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address <u>Joseph Eaton, CPA</u> <u>334 Underhill Avenue Suite 4B</u> <u>Yorton Heights, New York 10598</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$25,771.56
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Accounting Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.9	Nonpriority creditor's name and mailing address <u>Micky Roman</u> <u>c/o Chopra & Nocerino, LLP 85 Willis Avenue, Suite E</u> <u>Mineola, New York 11501</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$Unknown
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: <u>Personal Injury Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.10	Nonpriority creditor's name and mailing address <u>Sam Bryant</u> <u>171 Lyons Avenue</u> <u>Scarsdale, New York 10583</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$35,000.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.11	Nonpriority creditor's name and mailing address <u>U.S. Fire Insurance Company</u> <u>P.O. Box 28146</u> <u>New York, New York 10087-8146</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$109,255.00
	Date or dates debt was incurred _____ Last 4 digits of account number <u>7 4 1 0</u>	Basis for the claim: <u>Insurance Premiums</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<p>3.12 Nonpriority creditor's name and mailing address</p> <p><u>Webster Bank - Elan Financial Services</u></p> <p><u>P.O. Box 790408</u></p> <p><u>St. Louis, Missouri 63179-0408</u></p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number <u>1 4 7 4</u></p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>Credit Card</u></p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ <u>14,000.00</u></p>
---	--	----------------------------

<p>3.13 Nonpriority creditor's name and mailing address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ _____</p>
---	--	-----------------

<p>3.14 Nonpriority creditor's name and mailing address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ _____</p>
---	--	-----------------

<p>3.15 Nonpriority creditor's name and mailing address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ _____</p>
---	--	-----------------

<p>3.16 Nonpriority creditor's name and mailing address</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ _____</p>
---	--	-----------------

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. Stein & Stein, LLP 1 Railroad Square Haverstraw, New York, 10927	Line <u>3.5</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.2. Panteris & Panteris, LLP 35-16 Bell Blvd. Bayside, New York, 11361	Line <u>3.6</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.3. Capacity Coverage Co. of NJ P.O. Box 1689 Pearl River, New York, 10965	Line <u>3.11</u> <input type="checkbox"/> Not listed. Explain _____	<u>7</u> <u>4</u> <u>1</u> <u>0</u>
4.4. Crum & Forster 160 Water Street New York, New York, 10038	Line <u>3.11</u> <input type="checkbox"/> Not listed. Explain _____	<u>7</u> <u>4</u> <u>1</u> <u>0</u>
4.5. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.6. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.7. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.8. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.9. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.10. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.11. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____
4.12. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	_____

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a. \$0.00

5b. Total claims from Part 2

5b. + \$345,219.26

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$345,219.26

Attachment
Debtor: Accredited Limousine Service, LLC Case No:

Attachment 1

Alleged Workers' Compensation Obligations

Fill in this information to identify the case:

Debtor name Accredited Limousine Service, LLC

United States Bankruptcy Court for the: Southern District of New York

Case number (if known): _____ Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.2	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.3	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.4	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.5	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Fill in this information to identify the case:

Debtor name Accredited Limousine Service, LLC
United States Bankruptcy Court for the: Southern District of New York
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor			Column 2: Creditor
Name	Mailing address	Name	Check all schedules that apply
2.1 <u>Douglas Thornton</u>	<u>600 Mamaroneck Avenue, 4th Floor</u> Street <u>Harrison</u> <u>New York</u> <u>10528</u> City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 _____	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 _____	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 _____	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5 _____	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6 _____	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case and this filing:

Debtor Name Accredited Limousine Service, LLC

United States Bankruptcy Court for the: Southern District Of New York

Case number (if known): _____

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature


I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206—Summary)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____
MM / DD / YYYY

x 
Signature of individual signing on behalf of debtor

Douglas Thornton
Printed name

Sole/Managing Member
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Accredited Limousine Service, LLC
United States Bankruptcy Court for the: Southern District of New York
Case number (if known): _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2019</u> MM / DD / YYYY	to Filing date	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>170,000.00</u>
For prior year:	From <u>01/01/2018</u> MM / DD / YYYY	to <u>12/31/2018</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>2,882,293.00</u>
For the year before that:	From <u>01/01/2017</u> MM / DD / YYYY	to <u>12/31/2017</u> MM / DD / YYYY	<input checked="" type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>2,862,588.00</u>

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
From the beginning of the fiscal year to filing date:	From <u>01/01/2019</u> MM / DD / YYYY	to Filing date	<u>See Attachment 1</u>	\$ <u>13,000.00</u>
For prior year:	From <u>01/01/2018</u> MM / DD / YYYY	to <u>12/31/2018</u> MM / DD / YYYY	<u>Douglas Thornton</u>	\$ <u>40,000.00</u>
For the year before that:	From <u>01/01/2017</u> MM / DD / YYYY	to <u>12/31/2017</u> MM / DD / YYYY	_____	\$ <u>0.00</u>

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None

	Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1.	Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2.	Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

	Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1.	Douglas Thornton Insider's name 600 Mamaroneck Avenue Street Harrison NY 10528 City State ZIP Code	_____	\$ _____	Management Fees and Wages in the Ordinary Course
4.2.	Relationship to debtor Other Controlling Party	_____	\$ _____	
	Insider's name _____ Street _____ City _____ State _____ ZIP Code _____	_____		
	Relationship to debtor _____			

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

	Creditor's name and address	Description of the property	Date	Value of property
5.1.	Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____	_____	\$ _____
5.1.	Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____	_____	\$ _____

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____ Street _____ City State ZIP Code	_____ _____ _____ Last 4 digits of account number: XXXX- _____	_____	\$ _____

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. <u>See Attachment 2</u>	<u>Personal Injury</u>	<u>Supreme Court of the State of New York</u> Name <u>Bronx County</u> Street _____ City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<u>Case number</u> <u>20024/2018E</u>			
7.2. <u>See Attachment 3</u>	<u>Debt Collection</u>	<u>Supreme Court of the State of New York</u> Name <u>Westchester County</u> Street _____ City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<u>Case number</u> <u>67865/2017</u>			

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address	Description of the property	Value
Custodian's name	Case title	\$
Street	Case number	Court name and address
City State ZIP Code	Date of order or assignment	Name
		Street
		City State ZIP Code

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$
Street			
City State ZIP Code			
Recipient's relationship to debtor			
9.2. Recipient's name			\$
Street			
City State ZIP Code			
Recipient's relationship to debtor			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B Assets - Real and Personal Property).	Date of loss	Value of property lost
			\$

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<u>Pick & Zabicki LLP</u> Address <u>369 Lexington Avenue, 12th Floor</u> Street <u>New York</u> <u>NY</u> <u>10017</u> City State ZIP Code Email or website address <u>dpick@picklaw.net</u> Who made the payment, if not debtor? <u>Douglas Thornton</u>	<u>\$17,500 Retainer - \$2,500 Expenses</u>		<u>\$20,000.00</u>

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	 Address Street City State ZIP Code Email or website address Who made the payment, if not debtor?			\$ _____

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
			\$ _____
Trustee			

page 6

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 8: Healthcare Bankruptcies

15. Healthcare bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. Facility name _____ Street _____ City _____ State _____ ZIP Code _____	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____ _____	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.2. Facility name _____ Street _____ City _____ State _____ ZIP Code _____	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____ _____	How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
☐ Yes. State the nature of the information collected and retained. _____
Does the debtor have a privacy policy about that information?
☐ No
☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?
☐ No. Go to Part 10.
☐ Yes. Fill in below:
Name of plan _____ Employer identification number of the plan _____
EIN: _____
Has the plan been terminated?
☐ No
☐ Yes

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2.	Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Address _____			

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Address _____			

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	
City _____ State _____ ZIP Code _____			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium)
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____	_____	<input type="checkbox"/> Pending
_____	Street _____	_____	<input type="checkbox"/> On appeal
_____	City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> Concluded

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
25.1.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____
25.2.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____
25.3.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Dates of service

26a.1. Joe Eaton
Name
7 Dawson Street
Street

From 01/01/2020 To _____

Huntington Station NY 11746
City State ZIP Code

Name and address

Dates of service

26a.2. _____
Name

Street

From _____ To _____

City State ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Name and address

Dates of service

26b.1. _____
Name

Street

From _____ To _____

City State ZIP Code

Name and address

Dates of service

26b.2. _____
Name

Street

From _____ To _____

City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address

If any books of account and records are
unavailable, explain why

26c.1. _____
Name

Street

City State ZIP Code

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Name and address

**If any books of account and records are
unavailable, explain why**

26c.2.

Name _____

Street _____

City _____

State _____

ZIP Code _____

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.2.

Chase Bank

Name _____

Street _____

City _____

State _____

ZIP Code _____

Name and address

26d.2.

Key Bank

Name _____

Street _____

City _____

State _____

ZIP Code _____

See Attachment 4

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

**Date of
inventory**

**The dollar amount and basis (cost, market, or
other basis) of each inventory**

\$ _____

Name and address of the person who has possession of inventory records

27.1.

Name _____

Street _____

City _____

State _____

ZIP Code _____

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Name of the person who supervised the taking of the inventory

Date of
inventory

The dollar amount and basis (cost, market, or
other basis) of each inventory

\$ _____

Name and address of the person who has possession of inventory records

27.2.

Name _____

Street _____

City _____

State _____

ZIP Code _____

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Douglas Thornton	See Attachment 5	See Attachment 6	100.00
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1. Douglas Thornton Name 600 Mamaroneck Avenue Street	\$78,000	2018	See 7
Harrison City NY 10528 State ZIP Code			
Relationship to debtor			

Debtor Accredited Limousine Service, LLC
Name

Case number (if known) _____

Name and address of recipient

Name _____

Street _____

City _____

State _____

ZIP Code _____

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

Name of the parent corporation _____

Employer identification number of the parent corporation

EIN: _____ - _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No

☐ Yes. Identify below.

Name of the pension fund _____

Employer identification number of the pension fund

EIN: _____ - _____

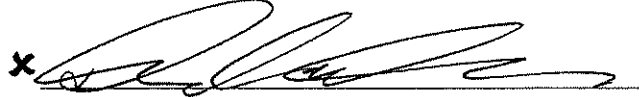
Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on _____
MM / DD / YYYY

x 

Signature of individual signing on behalf of the debtor

Printed name Douglas Thornton

Position or relationship to debtor Sole/Managing Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

Attachment
Debtor: Accredited Limousine Service, LLC Case No:

Attachment 1

County Trip Service; Douglas Thornton

Attachment 2

Micky Roman v. Stephen Blower and Accredited Limousine Services

Attachment 3

Commissioners of the State Insurance Fund v. Accredited Limousine Service, LLC

Attachment 4 Additional Financial Statement Recipients:

Name: Bank of America

Name: First Home Bank

Attachment 5

600 Mamaroneck Avenue, Harrison, New York 10528

Attachment 6

Managing Member - Sole Member

Attachment 7

Wages and Management Fees

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
SOUTHERN DISTRICT OF NEW YORK

In re **Accredited Limousine Service, LLC**

Case No. _____

Debtor

Chapter **11** _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept **\$17,500.00**

Prior to the filing of this statement I have received **\$17,500.00**

Balance Due **\$0.00**

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify) **Douglas Thornton**

3. The source of compensation to be paid to me is:

☐ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.	
_____ <i>Date</i>	_____ <i>Signature of Attorney</i>
Pick & Zabicki LLP _____ <i>Name of law firm</i>	

United States Bankruptcy Court
Southern District of New York

In re **Accredited Limousine Service,
LLC**

Case No.

Debtor.

Chapter 11

STATEMENT OF CORPORATE OWNERSHIP

Comes now **Accredited Limousine Service, LLC** (the "Debtor") and pursuant to Fed. R. Bankr. P. 1007(a) and 7007.1 state as follows:

____ All corporations that directly or indirectly own 10% or more of any class of the corporation's equity interests are listed below:

OR,

X There are no entities to report.

By: 

Douglas J. Pick

Signature of Attorney

Counsel for

Bar no.:

Address.: **369 Lexington Ave., 12th Fl.
New York, New York 10017**

Telephone No.: **(212) 695-6000**

Fax No.: **(212) 695-6007**

E-mail address: **dpick@picklaw.net**

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK**

In Re: Accredited Limousine Service,
LLC,

Debtor

Case No.

LIST OF EQUITY SECURITY HOLDERS

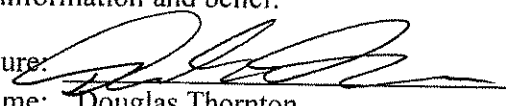
Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007, Fed. R. Bank. P. for filing in this Chapter 11 case.

Security Holder's Registered Name and Last Known Address or Place of Business	Class of Security	Number of Securities or Percentage	Kind of Interest
Douglas Thornton 600 Mamaroneck Avenue Harrison, New York 10528	NA	100%	Sole Member

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION
OR PARTNERSHIP**

I, Douglas Thornton, Managing/Sole Member of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing **List of Equity Security Holders** and that it is true and correct to the best of my information and belief.

Date: _____

Signature: 
Printed Name: Douglas Thornton
Title: Managing/Sole Member

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

In re: **Accredited Limousine Service, LLC**

Debtors

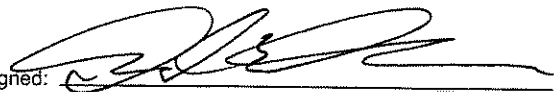
Case No. _____

Chapter **11** _____

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: _____

Signed:  _____

Dated: _____

Signed: _____

Signed: _____

Douglas J. Pick
Attorney for Debtor(s)

Bar no.:

**369 Lexington Ave., 12th Fl.
New York, New York 10017**

Telephone No.: **(212) 695-6000**

Fax No.: **(212) 695-6007**

E-mail address: **dpick@picklaw.net**

creditor

American Express Bank, FSB
4315 South 2700 West
Salt Lake City, Utah 84184

American Express Platinum
P.O. Box 650448
Dallas, Texas 75265-0448

Capacity Coverage Co. of NJ
P.O. Box 1689
Pearl River, New York 10965

Capital One Bank
P.O. Box 6492
Carol Stream, Illinois 60197-6492

Chase Business Preferred
P.O. Box 1423
Charlotte, North Carolina 28201-1423

Comdata
5301 Maryland Way
Brentwood, Tennessee 37027

Commissioners of The State Insurance Fun
199 Church Street
New York, New York 10007

Crum & Forster
160 Water Street
New York, New York 10038

Edson Financial
MAC N9300-100
600 South 4th Street
Minneapolis, Minnesota 55415

First Home Bank
9190 Seminole Blvd.
Seminole, Florida 33772

Guru Networks
222 Purchase Street
Suite 253
Rye, New York 10580

Internal Revenue Service
P.O. Box 21126

creditor

Philadelphia, Pennsylvania 19114

Joseph Eaton, CPA
334 Underhill Avenue
Suite 4B
Yorton Heights, New York 10598

Micky Roman
c/o Chopra & Nocerino, LLP
85 Willis Avenue, Suite E
Mineola, New York 11501

NYS Tax Commission
P.O. Box 5149
Albany, New York 11205

NYC Dept. of Finance
345 Adams Street, 3rd Floor, Attn: Legal
Brooklyn, New York 11201

NYC Law Dept.
100 Church Street
New York, New York 10007

NYS Attorney General
120 Broadway
New York, New York 10271

NYS Dept. of Taxation & Finance
Bankruptcy/Special Procs., P.O. Box 5300
Albany, New York 12205-0300

NYS Unemployment Insurance Fund
P.O. Box 551
Albany, New York 12201

Office of the U.S. Trustee
201 Varick Street, Suite 1006
New York, New York 10014

Panteris & Panteris, LLP
35-16 Bell Blvd.
Bayside, New York 11361

U.S. Dept. of Justice
Box 55
Washington, District of Columbia 20044

creditor

United States Attorney
One St. Andrews Plaza
New York, New York 10007

Sam Bryant
171 Lyons Avenue
Scarsdale, New York 10583

Stein & Stein, LLP
1 Railroad Square
Haverstraw, New York 10927

Sterling Bank
One Marcus Avenue
Lake Success, New York 11042

TCF Equipment Finance
11100 Wayzata Blvd.
Suite 801
Minnetonka, Minnesota 55305

Toyota Financial Services
P.O. Box 15012
Chandler, Arizona 85244-2012

U.S. Fire Insurance Company
P.O. Box 28146
New York, New York 10087-8146

Webster Bank - Elan Financial Services
P.O. Box 790408
St. Louis, Missouri 63179-0408

Webster Bank, N.A.
436 Slater Road, NB 145
New Britain, Connecticut 06053

Zwicker & Associates, P.C.
80 Minuteman Road
Andover, Massachusetts 01810-1008